

Entered 6-11-03 - sb CL 03L0446 - GWENDOLYN BURNS

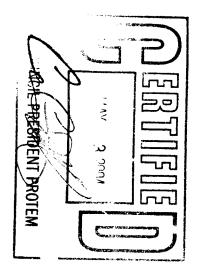
CLAIM OF: DINAMY GANTT

82 Little Street

Atlanta, Georgia 30315

04- R-0673

For vehicular damage allegedly sustained after driving over a pothole on April 5, 2003 at Humphries Street & 762 Metropolitan Parkway, SW.



THIS ADVERSED REPORT IS APPROVED

BY:

JERRY L. DELOACH DEPUTY CITY ATTORNEY

ور جايڪ ADVERSE REPORT PUBLIC SAFTEY & LEGAL ADMINISTRATION COMMITTEE DATE: 110 CHAIR:

CESSEYO.

MAY 0 3 2004



RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK

May 10, 2004

55 TRINITY AVENUE, S.W. SECOND FLOOR, EAST SUITE 2700 ATLANTA, GEORGIA 30303 (404) 330-6033 FAX (404) 658-6273

Dinamy Gantt 82 Little Street Atlanta, GA 30315

04-R-0673

Dear Ms. Gantt:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on December 01, 2004. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the City Attorney's Office/Claims Division at (404) 330-6400.

Yours very truly

Rhonda Dauphin Johnson, CMC

Municipal Clerk

cc: Claims Division/Law Department

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>03L0882</u>	Date: <u>April 13, 2004</u>
Claimant / Victim DINAMY GANTT	
BY: (Atty) (Ins. Co.)	
Address: 82 Little Street Atlanta Georgia 30315	
Subrogation: Claim for Property damage \$_1	Ante Litem (6 Mo.) Street @ 762 Metropolitan Parkway, SW
Date of Notice: <u>5/30/03</u> Method: Written, Proper	X Improper
Conforms to Notice: O.C.G.A. §36-33-5	Ante Litem (6 Mo.)
Date of Occurrence 4/5/03 Place: H	Iumpries Street @ 762 Metropolitan Parkway, SW
Divis	51011.
Employee involved Disciplinar	ry Action:
NATURE OF CLAIM: Claimant alleges that she su	stained vehicular damages when she drove over a pothole
in an effort to avoid a flooded area in the road. How	wever, an investigation determined that the pothole was
located on private property and not in the public right-o	f-way area
INVESTIGATION:	
Statements: City employee Claimant	Others Written Oral
Pictures X Diagrams Reports: Police	Dent Report Other X
Traffic citations issued: City Driver	Claimant Driver
Citation disposition: City Driver	Claimant Driver
PAGE OF PEGON CONTRACT	
BASIS OF RECOMMENDATION:	
Function: Governmental	Ministerial
Improper Notice More than Six Months	Other X Damages reasonable
City not involved X Offer rejected	Compromise settlement
Repair/replacement by Ins. Co.	Compromise settlement
Claimant Negligent City Negligent	Loint Claim Abandonad
City Regingent	John Craim Abandoned
	Respectfully submitted,
	1 J
	Julnally sun
	MVESTIGATOR - GWENDOLYN BURNS
RECOMMENDATION:	
Paris Villa III	1. 1.1.01
Pay \$ Adverse X Account charged	
Claims Manager: Much Mughster	Concur/date
Committee Action	Council Action
FORM 23-61	

DURNS 06/09/03 RE: CLAIM FOR DAMAGES

COUNCIL OF THE CITY OF ATLANTA MUNICIPAL CLERK

City Hall 55 Trinity Avenue, SW Atlanta, Georgia 30335

RECEIVED

Today's Date: <u>5/14/03</u>

Atlanta, Georgia 30335	MAY 3 ∩ 2003 - ∠	
Dear Municipal Clerk:	MUNICIPAL CLERK	ENTERED - 6-11-03 - DP 03L0446 - GWEN BURNS
This is to notify the City of Atlanta that I have and/or \$ bodily inju	e suffered damages in the amount sum or y for which I contend the City is liable.	f \$ \$ 1966.67 property
1. Date of incident: 4/5/03 (month/day/ year)	2. Time of Incident: _//.'0000	3. Police called: Yes No
4. Location of incident (including street addr	ress): <u>Humphries Street SW at</u>	the Associated Imports Corp ware
5. Name of your insurance company: Pr	ogressive Auto Insurance	Policy No. <u>34636149-003</u>
	-	noming and Humphnes St. Was
	<u> </u>	on David Abernathy and made a
		, I tried to go around by
Veering to the right. The where my car had to be r	hole / damaged pavement la emoved. This Caused the amou ARE SUBJECT TO INSPECTION.	uas on the right and that is int of damages stated above. THE MAKING OF FALSE CLAIMS WILL
8. The registered owner must make the cla proof of ownership of your vehicle (copy		llowing and attach two (2) estimates of repair and
Your vehicle: Volkswagen JeHa (Make)	2001 289 WBL	050842285
	(Year) (Tag Number)	(Driver's Name)
City vehicle:(Make)	(City Driver's Name)	(Department/Bureau)
9. Witness:(Name)	(Address)	(Telephone Number)
	,	• •
State law, nor is it an admission of liability	y on behalf of the City of Atlanta and/or i	unity of the City of Atlanta, as granted by its employee(s).
11. Claims <u>must</u> be received within 6 month	as of the event.	
I HEREBY SWEAR OR AFFIRM THAT INFORMATION IS TRUE AND CORRE	THE ABOVE Dinac	ny Gartt (Print Claimant's Name)
(Ctt		street
Signature of Claimant	2.4.	(Address)
	A+lan	ta, GA 30315 (City, State and Zip Code)
•	770-209-	,
04-R-0673	(Work Nun	